Division of Disability and Elder Services DDE-297 (Rev.7-03)

CBRF VARIANCE REQUEST

HFS 83.02(2)(b) allows the Department to grant a variance to a requirement of CBRF licensing rules when it is demonstrated that granting the variance will not jeopardize the health, safety, welfare or rights of any resident in the CBRF. The request shall be in writing. Send the request to the regional office that licensed the CBRF. The request must include the justification for the requested action and a description of any alternative provision planned to meet the intent of the requirement. Completion of this form is voluntary.

NOTE: If this is a variance request for use of RESTRAINTS, all documentation required by BQA Memo No. 97-015 CBRF 06, dated 6-19-97 shall be included with the request. Name - CBRF Date of Request Mailing Address City State **VARIANCE FROM RULE** TIME PERIOD OF VARIANCE (mm/dd/yyyy) From: To: HFS 83. Describe justification for the variance requested and alternative provisions planned to meet the intent of the rule. (Attach additional pages and documentation as necessary.) SIGNATURE - Licensee Date **REVIEW BY REGIONAL FIELD OPERATIONS MANAGER** Approved Denied Conditions or Reasons Variance Denied **SIGNATURE - RFOD** Date Signed